

# Comment Card

\*\*\*NOTICE\*\*\*



PLANNING COMMISSION

Your Information may be subject to the Open Records Request.

Agenda Item #: DI

Name (Please PRINT)

TRACY WITTE

Please indicate your position on this item:

- ☐ FOR the request  
☒ AGAINST the request  
☐ NEUTRAL / UNDECIDED  
☐ None of Above: Citizens Communication

Address (Optional)

E 14th

Do you wish to speak on this item?

- ☐ YES  
☒ NO

Phone (Optional)

Date

If No, Do you wish to donate your time?

- ☐ YES  
☐ NO

5/10/2014

If Yes, To whom?

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Agenda Item #: DI

Name (Please PRINT)

KRISTINE GARAYZA

Please indicate your position on this item:

- ☐ FOR the request  
☒ AGAINST the request  
☐ NEUTRAL / UNDECIDED  
☐ None of Above: Citizens Communication

Address (Optional)

E 13th

Do you wish to speak on this item?

- ☐ YES  
☐ NO

Phone (Optional)

Date

If No, Do you wish to donate your time?

- ☐ YES  
☐ NO

5/10/2014

If Yes, To whom?

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Name (Please PRINT)

PAULA RECKSON

Please indicate your position on this item:

- ☐ FOR the request  
☒ AGAINST the request  
☐ NEUTRAL / UNDECIDED  
☐ None of Above: Citizens Communication

Address (Optional)

WALLER

Do you wish to speak on this item?

- ☒ YES  
☐ NO

Phone (Optional)

Date

If No, Do you wish to donate your time?

- ☐ YES  
☐ NO

5/10/2014

If Yes, To whom?